# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



# FORM D

3235-0076 OMB Number: Expires: April 30, 2008 Estimated average burden hours per response......16.00

SEC USE ONLY						
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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4 (6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Offering of Convertible Promissory Notes	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Filing Under (check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(	6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	07083731
Enter the information requested about the issuer	
Name of Issuer ( check if this an amendment and name has changed, and indicate change.)	
NexGenVS, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2200 Kraft Drive, Suite 1200, Blacksburg, VA 24060	540-443-9202
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(If different from Executive Offices)	
Brief Description of Business	
Developing and commercializing mobile phone video application.	
Type of Business Organization	
	er (please specify): limited liability company
business trust limited partnership, to be formed	
Month	Year
return of Education Date of interpolation of Organization	O 6 Actual PROCESSE
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State;	
CN for Canada; FN for other foreign jurisdiction)	NUA 3 3 2002
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### GENERAL INSTRUCTIONS

#### Federal:

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. 15 U.S.

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying of ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not SEC 1972 (6-02) required to respond unless the form displays a currently valid OMB control number.

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers Executive Officer Director General and/or Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Morrow, Richard B. Business or Residence Address (Number and Street, City, State, Zip Code) 1220 Inglecress Drive, Charlottesville, VA 22903 | | Director Check Box(es) that Apply: X Promoter |X| Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Lazar, Z. Peter Business or Residence Address (Number and Street, City, State, Zip Code) 2200 Kraft Drive, Suite 1200, Blacksburg, VA 24060 Beneficial Owner |X Director Check Box(es) that Apply: | Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Balac, Joseph F., Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 7403 Gateway Court, Manassas, VA 20109 Check Box(es) that Apply: Promoter | Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Handy, Jeffrey P. Business or Residence Address (Number and Street, City, State, Zip Code) 7403 Gateway Court, Manassas, VA 20109 Check Box(es) that Apply: | Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Fulcrum IT Services Company Business or Residence Address (Number and Street, City, State, Zip Code) 7403 Gateway Court, Manassas, VA 20109 **Executive Officer** Director General and/or Check Box(es) that Apply: Beneficial Owner Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner **Executive Officer** Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

•					B. INF	ORMAT	ION ABO	OUT OFF	ERING				
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No			
	Answer also in Appendix, Column 2, if filing under ULOE												
2.	. What is the minimum investment that will be accepted from any individual?									\$ 25,000 to wai	) (subject ver)		
3.	. Does the offering permit joint ownership of a single unit?										Yes	No	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full	Name	(Last nam	ne first, if	individual)									
Bus	iness or	Residen	e Addres	s (Number	and Street	t, City, Stat	te, Zip Coo	le)					
Nar	ne of A	ssociated	Broker or	Dealer									
(Ch [A [I [M [F	eck "Al L] L] IT] IName	l States" ( [AK] [IN] [NE] [SC] (Last nam	or check is [AZ] [IA] [NV] [SD] ne first, if	Has Solicit ndividual S [AR] [KS] [NH] [TN] individual)	tates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	All State [GA] [MN] [OK] [WI]	es [HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
						., 01.,, 514.	,p						
Nar	ne oi A	ssociated	Broker or	Dealer									
				Has Solicit		nds to Soli	cit Purcha	sers			7 A 11 Ctot		-
[A] [I] [M] [F]	L] L] [T] U]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	ndividual S [AR] [KS] [NH] [TN] individual)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	] All State [GA] [MN] [OK] [WI]	ES [HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
[A	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
_	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
_	[T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PRO	CEEDS
•	Enter the aggregate offering price of securities included in this offering and the total am Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, checindicate in the column below the amounts of securities offered for exchange and already	k this box 🔲 and	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0	\$ 0
	Equity	\$	- \$ <u> </u>
	Common Preferred		
	Convertible Securities (including recoments)	¢ 1.900.000	250,0000
	Convertible Securities (including warrants) Partnership Interests	\$ <u>1,800,000</u> \$ 0	\$ 0
	Other (Specify)	\$	\$
	Oulci (Specify	Ψ <u> </u>	J
	Total	\$ 1,800,000	\$250,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount
		1114031013	of Purchases
	Accredited Investors	3	\$250,000
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	T 0 00 1	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505 Regulation A		\$
			<u>*</u>
	Rule 504		* ———
4	a. Furnish a statement of all expenses in connection with the issuance and distribution		J
т.	of the securities in this offering. Exclude amounts relating solely to organization		
	expenses of the issuer. The information may be given as subject to future		
	contingencies. If the amount of an expenditure is not known, furnish an estimate and		
	check the box to the left of the estimate.	_	_
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		2
	Legal Fees	ĭ	\$ 35,000
	Accounting Fees	Ä	<b>3</b>
	Engineering Fees	Ļ	ž ———
	Sales Commissions (Specify finder's fees separately)	$\sqcup$	<b>&gt;</b>

35,000

	C. OFFERING PRICE	<u>, number of investors, exp</u>	'ENSES A	ND USE OF	PROCE	EDS	
C	Question 1 and total expenses furnis	aggregate offering price given in response to hed in response to Part C-Question 4.a. This issuer."	s difference		\$	1,765	,000
b fi li	e used for each of the purposes surnish an estimate and check the bo	ljusted gross proceeds to the issuer used or shown. If the amount for any purpose is ex to the left of the estimate. The total of the proceeds to the issuer set forth in respons	not known, ne payments				
				Payment Officer Directors Affiliat	rs, s, &	Payment Other	
	Salaries and fees		🖂	\$160,00	<u>0</u> 🛭 \$	162,	080
	Purchase of real estate			\$	🗆 🛚		
	Purchase, rental or leasing and	l installation of machinery and equipment		\$	🗆 🛚		
	Construction or leasing of plan	nt buildings and facilities		\$	🗆 🛚		
	this offering that may be used	es (including the value of securities involv in exchange for the assets or securities of erger	•	\$	🗆 \$	·	
	Repayment of indebtedness			\$	🗆 💲		
	Working capital			\$	×	372,	920
	<del></del> -	support, marketing and sales		\$	🛛	570,	000
				\$	🖂 S	500,	000
	Column Totals		×	\$160,000	<u>0</u> 🛭 \$	1,605	,000
	Total Payments Listed (colum	n totals added)					
		D. FEDERAL SIGNATU	RE				-
follow	ing signature constitutes an underta	be signed by the undersigned duly author aking by the issuer to furnish to the U.S. See he issuer to any non-accredited investor pur	curities and E	Exchange Com	mission, uj	on written	
Issuer	(Print or Type)	Signature:	E	Date /			
NexGenVS, LLC		3Por For		11/6/	07		
Name	of Signer (Print or Type)	Title of Signer (Print or Type)					
Z. Pet	er Lazar	President	1	FMI			
		ATTENTION		<u> </u>			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)